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PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/603,129 TRANSMITTAL Filing Date June 24, 2003 First Named Inventor **FORM** SCHUESSLER, David J. Art Unit 1772 **Examiner Name** Sandra M. Rayford (to be used for all correspondence after initial filing) Attorney Docket Number 33915-03420 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC ✓ Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a **Proprietary Information** After Final Provisional Application Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer **Extension of Time Request** below): Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name MILBANK, TWEED, HADLEY & McCLOY LLO Signature lev Rte Printed name James R. Klaiber Date Reg. No. August 9, 2005 41,902 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Press Signature Jorge M. Torres August 9, 2005 Typed or printed name

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Complete if Known

10/603,129

erwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

Fees pursyant to	the Consolidated Appropriations Act, 2005 (H.R. 4818).
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	For FY 2005

Effective on 12/08/2004.

TEE IRAN	19MIIIAL	Filing Date	June 24, 2003	
For FY	2005	First Named Inventor	SCHUESSLER, David J.	
	-tu- 007 OFD 4 07	Examiner Name	Sandra M. Rayford	
Applicant claims small entity st	atus. See 37 CFR 1.27	Art Unit	1772	
TOTAL AMOUNT OF PAYMENT	(\$)	Attorney Docket No.	33915-03420	

Application Number

TOTAL AMOUNT OF PAY	MENI (\$	)		Attorney Docke	t No.   339	15-03420	
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FEE CALCULATION					* **		
1. BASIC FILING, SEAF	FILING		SEARC	H FEES Small Entity		TION FEES	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
. Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEE Fee Description Each claim over 20 (i Each independent cla Multiple dependent c Total Claims	ncluding R im over 3 ( laims  Extra Clair  1 daims paid fo Extra Clair  0	including Reiss  ns Fee (\$)  x 50  or, if greater than 20.  ns Fee (\$)  x 200	Fee P	aid (\$)		Fee (\$) 50 200 360 Multiple D Fee (\$)	Small Entity Fee (\$) 25 100 180 Dependent Claims Fee Pald (\$)
HP = highest number of inde		s paid for, if greater t	han 3.				
3. APPLICATION SIZE If the specification and listings under 37 Cl sheets or fraction th Total Sheets 100 =	drawings 6 FR 1.52(e))	, the application 35 U.S.C. 41(a	n size fee o )(1)(G) an er of each	due is \$250 (	\$125 for small 6(s).	all entity) for ereof Fee	ence or computer r each additional 50  (\$) Fee Paid (\$)
4. OTHER FEE(S)  Non-English Specific	eation, \$1	30 fee (no sma	l entity di	scount)			Fees Paid (\$)
Other (e.g., late filing	g surcharge	e):					

SUBMITTED BY					
Signature	In he the	Registration No. (Attorney/Agent) 41, 902	Telephone (212) 530-5000		
Name (Print/Type	James R. Klaiber		Date August 9, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



## N THE UNITED STATES PATENT AND TRADEMARK OFFICE

David J. Schuessler

Art Unit:

1772

Serial No.:

10/603,129

Examiner:

Sandra M. Rayford

Filed:

June 24, 2003

Title:

ROTATIONALLY MOLDED MEDICAL ARTICLES

## RESPONSE G – RESPONSE TO JUNE 24, 2005 OFFICE ACTION

Mail Stop Amendments Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir or Madam:

Applicant respectfully submits this Response to the Office Action mailed on June 24, 2005. Please amend the above-identified application as follows.

Amendments to the Claims are reflected in the corrected listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

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